				•								
Pleas	se type a plus sign (+) ins	ide this box> + eduction Act of 1995, no person	Detent and Traden	nork Office U.S.	hrough 9/30/00. OM	COMMERCE						
	Under the Paperwork Re a valid OMB control num	eduction Act of 1995, no person iber.	is are required to respo	no to a conscitor	Of thornaudit times							
			Attorney Dock	et Number	BOW1335-00	BOW1335-003						
C		FOR UTILITY OF SIGN	First Named I	Gruenwald et	al.							
		PPLICATION	COMPLETE IF KNOWN									
	• • • •	FR 1.63)		Application Number								
	(3, 3,	,	Filing Date		ril 26,2000)						
风	Submitted OR	Declaration Submitted after Initia										
	with Initial Filing	Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Nan	ne								
=======================================	My residence, post office I believe I am the original names are listed below) of the specification of which is attached hereto OR was filled on (MM/I hereby state that I have namended by any amendment acknowledge the duty to the original or section of the original or section or sec	po/////) and was eviewed and understand the co- ent specifically referred to abov- disclose information which is m tity benefits under 35 U.S.C. 1 PCT international application	one name is listed belo eimed and for which a of the Invention) as Uni- s amended on (MM/DD entents of the above ide e. aterial to patentability a 19(a)-(d) or 365(b) of a which designated at	w) or an original, satent is sought of the States Applied States A	cetion Number or PC tion, including the cla CFR 1.56.	it or inventor's						
Ļ	rior Foreign Application		Foreign Filing Date	Priority	· · · · · ·	· —						
Number(s)		Country	(MM/DD/YYYY)	Not Cialme	TYESI	INOI						
E	<u> </u>		venlementel ededhi de	to sheet DTO/SI	R/02R attached here	to:						
F	Additional foreign application	eign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: The benefit under 35 U.S.C. 1 19(e) of any United States provisional application(s) listed below.										
-	Application Number	(s) Filing Date	(MM/DD/YYYY)									
	Ophingerion seminer	11-7		nur nur	bers are listed or	18						

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/02B attached hereto.

+

Please type a plus sign (+) inside this box →	+
18429 (Abe a bice a.e., ()	

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION - Utility or Design Patent Application														
I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 11 2, 1 acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.														
U.S. Parent Application or PCT Parent Number								Parent Filing Date (MM/DD/YYYY)			Parent Patent Number (if applicable)			
- Number														
Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.														
As a nam	ned invent	or, I hereby appoint th	e folic	en gniwo	gistered	practitione	r(s) to	prosecu	te th	is application	on and to	transac	at all business in	the Patent
and Trademark	Office co	nnected therewith:		Custon	er Num	ber					7	ļ	Number Bar (Code
				Registe	ered pra	ctitioner(s)	nam	e/registr	ation	number lis	ted belo	<u>w L</u>	I Rhei her	
	Nam	6				egistration Number				Nam	•		Registration Number	
Dans A Gil				31,95										
Roger A. Gil Carol G. Sto	vskv			42,17				1						
Sean M. Cas				39,514				Jeffrey C. Norris				42,039		
Cheryl S. Sc	otnev			P-46,					_	Kwak			41,133	
Additional	registered	practitioner(s) nam	ed or	n suppl	emental	Registere	d Pra	ctitioner	Infor	mation she	et PTO	SB/02C	attached heret	0
Direct all correspondence to: Customer Number or Bar Code Label							ondence addr	ess below						
Name	ROGER A. GILCREST													
Address	Standl	ey & Gilcrest	LLP											
	495 M	etro Place Sou	th, S	Suite	210									
Address	Dublin,							State Ohio ZIP 43017						
City	61/					ne 614-	792-	92-5555 Fax 614-792-5536						
Country USA Telephone 014-792-3333 I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are believed to be true; and further that these statements were made with the knowledge that willful false statements may jeopardize the validity of the punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.														
Name of S	ole or F	irst inventor:						A peti	tion	has been	filed fo	r this u	insigned inve	ntor
			iif ar	nyl)	***		T			Famil	v Name	or Su	mame	
Robert	Given Name (first and middle [if any])							Family Name or Surname Gruenwald						
		10-0	+ 6				A					Date	3-29-0	
Signature		Robe	<u>~/</u>		12	uen	4	M.	$\widetilde{}$					
Residence: (City	Cincinnat	<u>i</u>		State	OH	\perp	Countr		USA	•		Citizenship	USA_
Post Office Address 2072 Greenpine														
Post Office A														
City		Cincinnate	lete	OH zı		211	. 4	45231		Co	Country USA			
Additional inventors are being named on the 1 supplemental Additional inventor(s) sheet(s) PTO/SB/02A attached heret														
Additions	ai invent	nis sia naluñ usu				F F			_	ئند				

Please type.a plus sign (+) inside this box → +

PTO/SB/02A (3-97)
Approved for use through 9/30/98. OMB 0651-0032

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number,

ADDITIONAL INVENTOR(S) **DECLARATION** Supplemental Sheet Page 1 of 1 A petition has been filed for this unsigned inventor Name of Additional Joint Inventor, if any Family Name or Surname Given Name (first and middle [if any]) Major Jeff T. 3-29-2000 **Inventor's** Date Signature USA OH USA Citizenship Cygnet Country Residence: City 6998 Potter Road Post Office Address **Post Office Address USA** 43413 OH Country Cygnet ZIP State City A petition has been filed for this unsigned inventor Name of Additional Joint Inventor, if any: Family Name or Surname Given Name (first and middle [if any]) Palumbo Anthony J. inventor's 26-Signature USA Citizenship OH Perrysburg Country Residence: City 28765 White Road Post Office Address Post Office Address **USA** ZIP 43551 Country OH Perrysburg State City A petition has been filed for this unsigned inventor Name of Additional Joint Inventor, if any: Family Name or Surname Given Name (first and middle [if any]) Inventor's Signature Citizenship State Residence: City Post Office Address Post Office Address Country

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.